

Public Law 113–196
113th Congress

An Act

Nov. 26, 2014
[S. 2539]

To amend the Public Health Service Act to reauthorize certain programs relating to traumatic brain injury and to trauma research.

Traumatic Brain
Injury
Reauthorization
Act of 2014.
42 USC 201 note.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the “Traumatic Brain Injury Reauthorization Act of 2014”.

SEC. 2. CDC PROGRAMS FOR PREVENTION AND SURVEILLANCE OF TRAUMATIC BRAIN INJURY.

(a) PREVENTION OF TRAUMATIC BRAIN INJURY.—Section 393B(b)(3) of the Public Health Service Act (42 U.S.C. 280b–1c(b)(3)) is amended by striking “2010, commonly referred to as Healthy People 2010” and inserting “2020, commonly referred to as Healthy People 2020”.

(b) AUTHORIZATION OF APPROPRIATIONS.—Section 394A of the Public Health Service Act (42 U.S.C. 280b–3) is amended—

(1) by striking the section heading and all that follows through “For the purpose” and inserting the following:

“SEC. 394A. AUTHORIZATION OF APPROPRIATIONS.

“(a) IN GENERAL.—For the purpose”;

(2) by striking the second period; and

(3) by adding at the end the following:

“(b) TRAUMATIC BRAIN INJURY.—To carry out sections 393B and 393C, there are authorized to be appropriated \$6,564,000 for each of fiscal years 2015 through 2019.”.

SEC. 3. STATE GRANTS FOR PROJECTS REGARDING TRAUMATIC BRAIN INJURY.

Section 1252 of the Public Health Service Act (42 U.S.C. 300d–52) is amended—

(1) in subsection (a), by striking “, acting through the Administrator of the Health Resources and Services Administration,”;

(2) in paragraphs (1)(A)(i) and (3)(E) of subsection (f), by striking “brain injury” and inserting “traumatic brain injury”;

(3) in subsection (h), by striking “under this section, and section 1253 including” and inserting “under this section and section 1253, including”; and

(4) in subsection (j), by striking “such sums as may be necessary for each of the fiscal years 2001 through 2005, and such sums as may be necessary for each of the fiscal years

2009 through 2012” and inserting “\$5,500,000 for each of the fiscal years 2015 through 2019”.

SEC. 4. STATE GRANTS FOR PROTECTION AND ADVOCACY SERVICES.

Section 1253 of the Public Health Service Act (42 U.S.C. 300d–53) is amended—

(1) in subsection (a), by striking “, acting through the Administrator of the Health Resources and Services Administration (referred to in this section as the ‘Administrator’),”;

(2) in subsections (c), (d)(1), (e)(1), (e)(4), (g), (h), and (j)(1), by striking “Administrator” each place it appears and inserting “Secretary”;

(3) in subsection (h)—

(A) by striking the subsection heading and inserting “**REPORTING**”;

(B) by striking “Each protection and advocacy system” and inserting the following:

“(1) **REPORTS BY SYSTEMS.**—Each protection and advocacy system”; and

(C) by adding at the end the following:

“(2) **REPORT BY SECRETARY.**—Not later than 1 year after the date of enactment of the Traumatic Brain Injury Reauthorization Act of 2014, the Secretary shall prepare and submit to the appropriate committees of Congress a report describing the services and activities carried out under this section during the period for which the report is being prepared.”;

(4) in subsection (i), by striking “The Administrator of the Health Resources” and all that follows through “regarding” and inserting “The Secretary shall facilitate agreements to coordinate the collection of data by agencies within the Department of Health and Human Services regarding”;

(5) in subsection (k), by striking “subtitle C of the Developmental Disabilities Assistance and Bill of Rights Act of 2000” and inserting “subtitle C of title I of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15041 et seq.)”;

(6) in subsection (l), by striking “\$5,000,000 for fiscal year 2001, and such sums as may be necessary for each the fiscal years 2009 through 2012” and inserting “\$3,100,000 for each of the fiscal years 2015 through 2019”; and

(7) in subsection (m)—

(A) in paragraph (1), by striking “part C of the Developmental Disabilities Assistance Bill of Rights Act (42 U.S.C. 6042 et seq.)” and inserting “subtitle C of title I of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15041 et seq.)”; and

(B) in paragraph (2), by striking “part C of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6042 et seq.)” and inserting “subtitle C of title I of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15041 et seq.)”.

SEC. 5. TRAUMATIC BRAIN INJURY COORDINATION PLAN.

(a) **DEVELOPMENT OF PLAN.**—Not later than 18 months after the date of enactment of this Act, the Secretary of Health and Human Services shall develop a plan for improved coordination of Federal activities with respect to traumatic brain injury. Such plan shall—

Deadline.

Review.

(1) review existing interagency coordination efforts with respect to Federal activities related to traumatic brain injury, including services for individuals with traumatic brain injury;

(2) identify areas for improved coordination between relevant Federal agencies and programs, including agencies and programs with a focus on serving individuals with disabilities;

(3) identify each recommendation in the report required by section 393C(b) of the Public Health Service Act (42 U.S.C. 280b–1d(b)) that has been adopted and each such recommendation that has not been adopted, and describe any planned activities to address each such recommendation that has not been adopted; and

(4) incorporate, as appropriate, stakeholder feedback, including feedback from individuals with traumatic brain injury and their caregivers.

(b) SUBMISSION TO CONGRESS.—The Secretary of Health and Human Services shall submit the plan developed under subsection (a) to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives.

SEC. 6. REVIEW OF BRAIN INJURY MANAGEMENT IN CHILDREN.

Consultation.

The Director of the Centers for Disease Control and Prevention, in consultation with the Director of the National Institutes of Health, shall conduct a review of the scientific evidence related to brain injury management in children, such as the restriction or prohibition of children from attending school or participating in athletic activities following a head injury, and identify ongoing and potential further opportunities for research. Not later than 2 years after the date of enactment of this Act, the Director of the Centers for Disease Control and Prevention shall submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives the results of such review.

Deadline.
Reports.

Approved November 26, 2014.

LEGISLATIVE HISTORY—S. 2539:

CONGRESSIONAL RECORD, Vol. 160 (2014):

Sept. 16, considered and passed Senate.

Nov. 13, considered and passed House.